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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2009</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/525,287-Conf. #7762
		Filing Date	February 16, 2005
		First Named Inventor	Tsuneo Maruyama
		Examiner Name	W. C. Joyce
		Art Unit	3656
TOTAL AMOUNT OF PAYMENT		(\$)	130.00
		Attorney Docket No.	09852/0202546-USO

**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>04-0100</u> Deposit Account Name: <u>Darby &amp; Darby P.C.</u>				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims    Extra Claims    Fee (\$)    Fee Paid (\$)  
21    - 27 or HP    x    =    \_\_\_\_\_  
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims    Extra Claims    Fee (\$)    Fee Paid (\$)  
5    - 7 or HP    x    =    \_\_\_\_\_  
 HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims  
Fee (\$)    Fee Paid (\$)

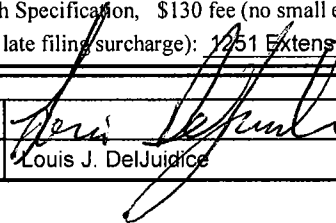
**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

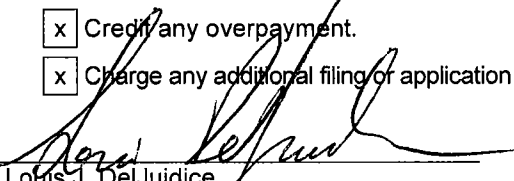
Total Sheets    Extra Sheets    Number of each additional 50 or fraction thereof    Fee (\$)    Fee Paid (\$)  
 \_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)  
 Other (e.g., late filing surcharge): 1251 Extension for response within first month    130.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	47,522
Name (Print/Type)	Louis J. DeJuidice	Telephone	(212) 527-7700
		Date	April 17, 2009

Express Mail Label No. \_\_\_\_\_ Dated: \_\_\_\_\_

<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 09852/0202546-US0	
Application No. 10/525,287-Conf. #7762	Filing Date February 16, 2005	Examiner W. C. Joyce	Art Unit 3656	
Applicant(s): Tsuneo Maruyama et al.				
Invention: ROTATION TRANSMISSION MEMBER, ROTATION TRANSMISSION ASSEMBLY, AND GEAR MECHANISM				
<b>TO THE COMMISSIONER FOR PATENTS</b>				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
<b>Total Claims</b>	21	- 27 =		x
<b>Independent Claims</b>	5	- 7 =		x
<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>				
<b>Other fee (please specify):</b> Extension for response within first month				130.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				130.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>04-0100</u> in the amount of \$ <u>130.00</u> . A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. <del>Form PTO-2038 is attached.</del>				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Louis J. DelJuidice Attorney/Agent Reg. No.: 47,522			Dated: <u>April 17, 2009</u>	
DARBY & DARBY P.C. P.O. Box 770 Church Street Station New York, New York 10008-0770 (212) 527-7700				
Express Mail Label No. _____ Dated: _____				